# **Position Description**

| Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Division of Personnel Services.  CHECK ONE:   NEW POSITION  X  EXISTING POSITION |                                 |   |              | Agency<br>Number |  |
|--|---------------------------------|---|--------------|------------------|--|
| Part 1 - Items 1 through 12 to be completed by department head or personnel office.  |                                 |   |              |                  |  |
| 1. Agency Name  Department for Children and Families   | 9. Position No. <b>K0227855</b> | 10. Budget Program Number   |              |                  |  |
| 2. Employee Name (leave blank if position vacant)  |                                 | 11. Present Class Title (if existing position)  Assistant Program Administrator |              |                  |  |
| 3. Division Family Services  |                                 | 12. Proposed Class Title PSE I  |              |                  |  |
| 4. Section   | For                             | 13. Allocation  |              |                  |  |
| 5. Unit Protection and Prevention Services/APS   | Use                             | 14. Effective Date Position Number  |              |                  |  |
| 6. Location (address where employee works)   | Ву                              | 15. By  | Approved     |                  |  |
| City Wichita County Sedgwick   |                                 |   |              |                  |  |
| 7. (circle appropriate time)   | Personnel                       | 16. Audit   | _            |                  |  |
| Full time X Perm. X Inter.   |                                 | Date:   | By:          |                  |  |
| Part time Temp. %  8. Regular hours of work: (circle appropriate time)   | Office                          | Date:   | By:          |                  |  |
| 8. Regular flours of work. (cricle appropriate time)   | Office                          | Date:   | By:          |                  |  |
| FROM: 8:00 AM/PM To: 5:00 AM/PM  |                                 | Date:   | By:          |                  |  |
| This position may require work beyond normal   |                                 |   | ,            |                  |  |
| business hours including evenings, weekends, and   |                                 |   |              |                  |  |
| holidays. There may be little to no notification of  |                                 |   |              |                  |  |
| the need to work beyond normal business hours  |                                 |   |              |                  |  |
| due to the immediate need to ensure safety of the clients served.  |                                 |   |              |                  |  |
| PART II - To be completed by department head,  | norconnol office                | l<br>or supervisor of the p   | osition      |                  |  |
| 18. If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position.              |                                 |   |              |                  |  |
| 19. Who is the supervisor of this position? (Who assigns work, gives directions, answers questions and is directly in charge.)   |                                 |   |              |                  |  |
| Name  Title  Position Number   |                                 |   |              |                  |  |
| Leslie Hale  | Program Manager                 |   | K0044631     |                  |  |
| Who evaluates the work of an incumbent in this position?   |                                 |   |              |                  |  |
| Name   | Title                           |   | Position Num | ber              |  |
| Leslie Hale  | Program Manager                 |   | K0044631     |                  |  |

20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made. 21. Describe the work of this position using the page or one additional page only. (Use the following format for describing job duties:) What is the action being done (use an action verb); to whom or what is the action directed (object of action); why is the action being done (be brief); how is the action being done (be brief). For each task state: Who reviews it? How often? What is it reviewed for? Number Each Task and Indicate Percent of Time 30% E **Human Resource Management** Provides leadership, guidance and direction to APS Social Work Supervisors in all matters involving program administration and management in the Wichita Region. Ensures recruitment, selection and hiring actions and personnel rules and regulations meets agency guidelines. Sets and communicates expectations regarding performance, behavior, attitude and conduct that are measurable, understandable, verifiable and reasonable. Confronts poor performance or behavior and addresses issues in a prompt manner according to personnel rules and regulations. Effectively uses available tools, including probationary period, to address poor performance, takes disciplinary action when appropriate and documents consistently. Actively supports the development of knowledge and skills to perform at a high level. Ensures necessary training and resources are available and used promptly. Creates and values a learning environment and provides recognition for efforts of others when high or improved performance is attained. Promotes awareness of total quality management practices including a commitment to bring about positive organizational change through the use of processes, tools, education, recognition, and communication; fosters teamwork using a disciplined problem solving and decision making approach. Maintains an efficient compliment of staff and increases staff productivity by using personnel management, orientation and knowledge of state personnel policies and practices.

25% E

#### Program/Policy

- Assists the APS Program Manager in organizing the delivery of services to customers in the Wichita Region.
- Oversees implementation of service programs, monitoring work flow and provides for integration of services with other programs.
- Assigns tasks in order to maintain the efficiency and effectiveness of the delivery of services for the APS program, identify needs and trends as well as maintain compliance with all applicable statutes,

regulations and policies. Implementation and planning of service delivery also includes supervising APS unit supervisors in the 10 county region. Monitors effectiveness of program operations, training and direct changes and improvements as necessary. This includes the identification of training needs and recommends appropriate corrective actions. Assists in evaluating program changes and outcomes to identify training needed in order to effectively implement APS policies, programs or procedures. **Resource Management** 25% Ε Assists in the management of the Regional APS resources, including staff, to ensure their actions are consistent with program policies, rules and regulations. Assures effective working relationships with all DCF staff and community stakeholders and partners. Manages the emergency funds allocation of funds for operation of APS programs, monitors expenditures and plans for future expenditures. **Community Involvement/Services** 20% E Represents agency to the community, interprets the APS role to the public and responds to public inquiries and complaints in a timely and respectful manner. Meets with community agencies and groups to educate the public, stakeholders and partners about APS programs and services in order to promote a positive image of the agency in the community. Creates avenues to ensure responsiveness to customers, partners, courts, and other interest groups. Assists APS Supervisors with supervising social work staff, as needed. 22. a. If work involves leadership, supervisory, or management responsibilities, check the statement which best describes the position. ( ) Lead worker assigns, trains, schedules, oversees, or reviews work of others. ( ) Plans, staffs, evaluates, and directs work of employees of a work unit. (X) Delegates authority to carry out work of a unit to subordinate supervisors or managers. b. List the names, class titles, and position numbers of all persons who are supervised directly by employee on this position. Title **Position Number** Social Work Supervisor K0060168 Social Work Supervisor K0076738

23. Which statement best describes the results of error in action or decision of this employee? ( ) Minimal property damage, minor injury, minor disruption of the flow of work.

( ) Moderate loss of time, injury, damage or adverse impact on healthy and welfare of others.

( ) Major program failure, major property loss, or serious injury or incapacitation.

(X) Loss of life, disruption of operations of a major agency.

Please give examples.

24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

Numerous contacts are required with customers, community providers, agency personnel to provide outreach and awareness for the APS program and problem solve around customer concerns.

25. What hazards, risks or discomforts exist on the job or in the work environment?

Dealings with angry and hostile individuals occur from time to time. The work environment involves normal everyday hazards or discomforts typical of offices, meeting, and training rooms. Some discomforts that may be experienced are fatigue from prolonged sitting, possible eye strain from use of computer monitor and stress from imposed deadlines. The potential for legal liability exists.

Entering homes and other environments that may be dirty, cluttered, possibly infested with bugs and rodents, and/or offensive odors.

The normal risk of traveling on Kansas highways would occur on occasions where travel is required.

26. List machines or equipment used regularly in the work of this position. Indicate the frequency with which they are used.

### Used daily:

- Personal computer with state access for state data systems
- Internet and e-mail
- Fax machine
- Copier
- Calculator
- State cars or rental vehicles
- Smart Phone

## PART III - To be completed by the department head or personnel office

27. List in the spaces below the minimum amounts of education and experience which you believe to be necessary for an employee to begin employment in this position.

Education - General

## Four year degree

Education or Training - Special or professional

Licensed Bachelor in Social Work or Master's in Social Work and driver's license.

| Maintain social worker license and current Kansas o   | driver's license.  |
|---|--|
| License, certificates and registrations   |  |
|   | ds and cultural influences on families. Knowledge of crisis intervention ressure. Ability to exercise sound judgment with close to moderate  |
| Broad knowledge of all DCF programs.  |  |
|   |  |
|   |  |
|   |  |
| Special knowledge, skills and abilities   |  |
| Two years' experience in planning, organizing and d<br>substituted for experience as determined relevant by | directing the work of a department, program or agency. Education may be y the Agency.  |
| Experience in social service program delivery and/or implementation.  | r administration, supervisory experience; policy planning and  |
| Experience - Length in years and kind   |  |
|   |  |
| a necessary special requirement, a bona fide occupa   | that are necessary either as a physical requirement of an incumbent on the job, ational qualification (BFOQ) or other requirement that does not contradict the ecification. A special requirement must be listed here in order to obtain |
|   |  |
| Signature of Employee Date  | Signature of Personnel Official Date   |
|   | Approved:  |
| Signature of Supervisor Date  | Signature of Agency Head or Date Appointing Authority  |